

No Schedule A results to display.

| Schedule B: In-Kind Contributions Over \$100 Full Name of Contributor Mailing Address of Contributor | Donor Information 1. Employer or Business (If Corporate/Company Donor: N/A) 2. Type of Business(If Corporate Donor Type of Business) 3. Business Location 4. Service/Goods Received 5. Basis used to Determine Value | Date Received | Contribution This Period | Aggregate To Date |
|--|---|------------------|-----------------------------|----------------------|
| Surovell For State Senate PO Box 289 Mt Vernon, VA 22121 | 1. 2. Campaign Committee 3. Mt Vernon, VA 4. Campaign Services 5. ActualCost | 10/31/2023 | \$7,500.00 | \$10,000.00 |
| Total This Period | | | | |

No Schedule E-1 results to display.